

Name in Full

Certificate of Death

Died at *Bradbrook* Town *Frederick* County *MARYLAND*

Date 189 *8* Month *8* Day *28* Y. *18* M.  D.  Native of  Occupation

Male

~~White~~~~Married~~~~Widow~~~~Divorced~~~~Female~~

Colored

Single

~~Widower~~~~Number of children living~~

Husband  
of  
Wife

Father's Name *Stephen Brown* Mother's Name

Cause of Death { Primary *Murdered* How long sick

Death { Immediate

Accident, Suicide, Homicide

Reported by

Address

*152*

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, 88968

J. W. Lundy, Frederick  
Physician, summoned  
George Schroeder, Undertaker

Name in Full

Certificate of Death

William Ezra Conover

Town

County

Died at

Bridgetown

Fredrick

MARYLAND

Date 189

8

Month

Day

8-20

Age

Y.

M.

D.

59-8-13

Native of

Occupation

Male

White

Married

~~Widow~~

Divorced

~~Female~~~~Colored~~~~Singl~~~~Widower~~

Number of children living

4

Husband

of

Wife

Father's

Name

Mother's

Name

Cause of

Primary

Paralysis

44

How long sick

Death

Immediate

Accident, Suicide, Homicide

Reported by

Carroll C. Reed (Tanymtown) Aug. 27

Address



Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, 55968



Name in Full

Certificate of Death

Died at

Town

County

MARYLAND

Date 189

Month

Day

Y.

M

D.

Native of

Occupation

~~Male~~

White

Married

~~Widow~~~~Divorced~~

Female

~~Colored~~~~Single~~~~Widower~~~~Number of children living~~

Husband

of

Wife

Father's

Name

Mother's

Name

Cause of

Primary

161

How long sick

Death

Immediate

Accident, Suicide, Homicide

Reported by

Address

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU. 65958



Name in Full

Certificate of Death

Harry Doll

Died at *Artana* Town *Frederick* County MARYLANDDate 189 *5* Month *5* Day *30* Y. *11* M. D. Native of Occupation

Male

White

~~Married~~~~Widow~~~~Divorced~~~~Female~~~~Colored~~

Single

~~Widower~~

Number of children living

Husband  
of  
WifeFather's  
Name *A. H. Doll*Mother's  
NameCause of  
Death { Primary  
Immediate

How long sick

Accident, Suicide, Homicide

Reported by *Banner of Liberty (Liberty town)*  
Address *9-8*

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, 35968





Name in Full

Certificate of Death

Dorsey

Died at *Frederick* TownCounty *duro*

MARYLAND

Date 1898 *Aug 10* Month Day  
*Male* ~~White~~ Age *— — —* Y. M. D. Native of *md* Occupation *—*  
~~Female~~ *Colored* Married *Widow* Divorced  
 Single *Widower* Number of children living

Husband  
ofFather's Name *Edw Dorsey*Mother's Name *Ida Johnson*Cause of Death { Primary *Stillborn*

How long sick

Death { Immediate *Accident to mother*

Accident, Suicide, Homicide

Reported by *C. V. Goodell Health Officer*Address *No Physician in attendance*

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, 65968



Name in Full

Certificate of Death

Michael Dorsey

Town

County

Died at

MARYLAND

Date 189 8 Aug 6 Y. 48 M. X D. X Native of Maryland Occupation Hostler  
 Male Female Married Widow Divorced  
Female Colored Single Widow Number of children living —

Husband

of

Wife

Father's

Name

Mother's

Name

Cause of

Primary

Death

Immediate

Reported by

Address

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, 1898

Greenbury Dorsey Rachel Dorsey  
 Cause of Death { Alcoholism Found dead  
Accident, Suicide, Homicide  
 Reported by Dr W. A. Long  
 Address 45 S. Market St. Frederick Md.



Name in Full

Certificate of Death

Died at

Date 189

Male

Husband

of

Wife

Father's

Name

Cause of

Death

Reported by

Address

Town

County

Month

Day

Y.

M.

D.

Native of

Occupation

Age

Married

~~Widow~~

Divorced

~~Female~~~~Colored~~~~Single~~~~Widower~~

Number of children living

Mother's

Name

Primary

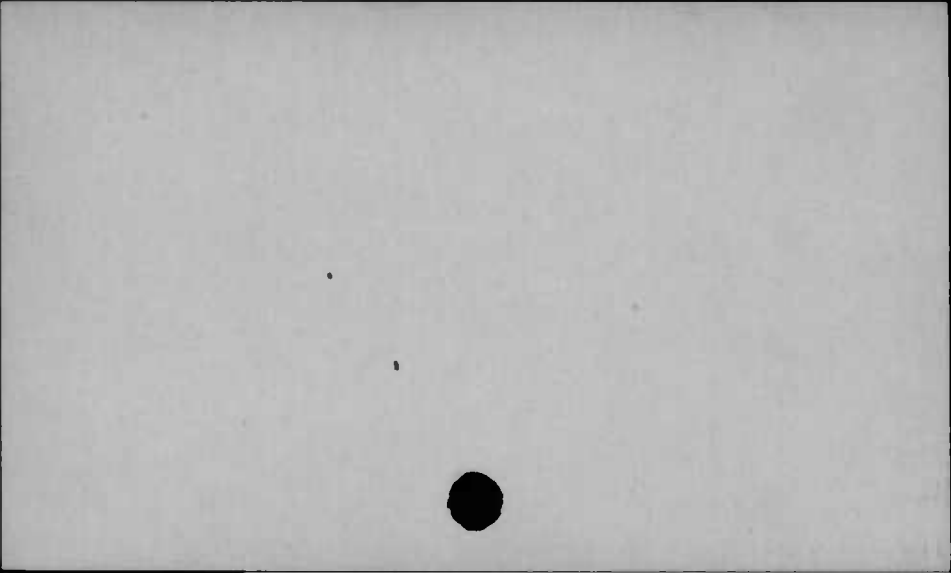
Immediate

How long sick

Accident, Suicide, Homicide

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

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Name in Full

Certificate of Death

Died at

Date 189

Male

White

~~Married~~~~Widow~~~~Divorced~~

Occupation

Husband  
of  
WifeFather's  
NameMother's  
Name

Cause of

Primary

Consumption

Death

Immediate

How long sick

Accident, Suicide, Homicide

Reported by

Address

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, 65968

McDonald  
Jesse Fox  
Town  
McKays

County  
Frederick

MARYLAND

Month Day Y.  
A A 23- Age 15

M. D.

Native of

~~Female~~~~Colored~~

Single

Widower

~~Number of children living~~

Henry C. Fox

Sarah E. Fox

W<sup>n</sup>

Daily News (Frederick) Aug. 26 &  
Valley Register (Middleton) Aug. 27

L. C. Carkey, & McKays, Undertakers



Name in Full

Certificate of Death

*Myrtle C. Geisinger,*  
 County *Frederick*

MARYLAND

Died at *Walkersville*  
 Town

Date 189 *8* Month *8* Day *19* Y. *8* M. *5* D. Native of Occupation  
~~Male~~ ~~White~~ ~~Married~~ ~~Widow~~ ~~Divorced~~  
 Female ~~Colored~~ Single ~~Widower~~ ~~Number of children living~~

Husband  
 of  
 Wife

Father's  
 Name *Charles Geisinger*

Mother's  
 Name *Alice Geisinger*

Cause of {  
 Primary  
 Death { Immediate

*161*

How long sick /

Accident, Suicide, Homicide

Reported by

*Banner of Liberty (Libertytown)*  
*9-8*

Address

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, 65968



Name in Full

Ann M. Gilbert

Town

County

MARYLAND

Died at

Haddon

Frederick

Date 189

8

Month

8-

Day

18

Age

45

Y.

M.

D.

Native of

Occupation

~~Male~~

White

Married

~~Widow~~~~Divorced~~

Female

~~Colored~~~~Single~~~~Widower~~

Number of children living

1

Husband

of

Wife

Father's

Name

Mother's

Name

Cause of

Primary

Consumption

229

How long sick

Death

Immediate

~~Accident, Suicide, Homicide~~

Reported by

Frederick Critzger Aug. 26

Address

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

S. A. Shattuck of Fresh, Undertaker

Name in Full

Certificate of Death

Victor Banghman Griffith

Died at

Mc Kays

Town

County

Frederick

MARYLAND

Date 189

5

Month

Day

5-26

Y.

M.

D.

Native of

Occupation

Age

19

Male

White

~~Married~~~~Widow~~~~Divorced~~~~Female~~~~Colored~~

Single

~~Widower~~~~Number of children living~~

Husband

of

Wife

Father's

Name

John Griffith

Mother's

Name

Cause of

Primary

Killed himself with  
a revolver 145-a

How long sick

Death

Immediate

~~Accident~~, Suicide, Homicide

Reported by

Gracie Frederick

8-2

Address

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, 65968

J. Lib, Mr. Pleasant,  
summoned

Name in Full

Certificate of Death

Carline E. Harbaugh

Town

County

Died at

Sabillasville

MARYLAND

Month

Day

Y.

M.

D.

Native of

Occupation

Date 189

A

8 - 10

Age

76-9

~~Male~~

White

~~Married~~~~Widow~~~~Divorced~~

Female

~~Colored~~

Single

~~Widower~~

Number of children living

~~Husband~~

of

~~Wife~~Father's  
NameMother's  
Name

Cause of

Primary

Paralysis

How long sick

Death

Immediate

Accident, Suicide, Homicide

Reported by

Valley Register

Aug. 27

Middletown

Address



Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, 1898





Mrs Caroline Heigdt

Town

County

Died at

Frederick

Frederick

MARYLAND

Month

Day

Y.

M.

D.

Native of

Occupation

Date 189

8

Aug 10

Age

79

~~Male~~

White

~~Married~~

Widow

~~Divorced~~

Female

~~Colored~~

Single

~~Widower~~

Number of children living

2

~~Husband~~

of

John Heigdt

Wife

Father's

Don't know

Name

Mother's

Name

Don't know

Cause of

Primary

Dysentery

How long sick

12 days

Death

Immediate

Accident, Suicide, Homicide

Reported by

J. J. Smith

Address



Died at *Emmittsburg* Town *Hobbs* County *Fredrick* MARYLAND

Date 189*8* *8* - *15* - *1903* Y. M. D. Native of Occupation  
~~Male~~ *White* ~~Married~~ ~~Widow~~ ~~Divorced~~  
 Female ~~Colored~~ ~~Single~~ ~~Widower~~ ~~Number of children living~~

~~Husband~~ of

Father's Name *Hallie Hobbs* Mother's Name

Cause of Primary

Death Immediate

How long sick *161*

Accident, Suicide, Homicide

Reported by

Address

*Valley Register-Middletown*  
*Aug. 27*



Name in Full

Certificate of Death

Marc Kerrigan

Town

County

Died at

Emmittsburg

Fredk.

MARYLAND

Date 189

Month

Day

Y.

M.

D.

Native of

Occupation

8 19

Age 84

~~Male~~

White

~~Married~~

Widow

~~Divorced~~

Female

~~Colored~~~~Single~~~~Widower~~

Number of children living 2

Husband of

Wife

Father's

Name

James Kerrigan

Mother's

Name

Cause of

Primary

General Debility

How long sick

Death

Immediate

141

Accident, Suicide, Homicide

Reported by

Fredk. Citrin Aug. 26

Address

(Valley Register Middletown)

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, 65868



Henry Frederick Kroch -

Town

County

Died at

Frederick

Frederick

MARYLAND

Date 189

8

Month

8.

Day

28

Age

67

Y.

M.

D.

x 25

Native of

Hesse Darmstadt

Occupation

Cabinet-

Male

White

Married

~~Widow~~~~Divorced~~

maker

~~Female~~~~Colored~~~~Single~~~~Widower~~

Number of children living

4

Husband

of

— . Kroch —

Father's

Mother's

Name

Name

Cause of

Primary

Acute Indigestion

How long sick

4

Death

Immediate

Paralysis of Heart - 5

Accident, Suicide, Homicide

Reported by

Franklin Buchanan Street M.D.

Address

Frederick City, Md.





Name in Full

Certificate of Death

Died at

MARYLAND

Date 189

8

Month

8

Day

16

Age

Y.

M.

D.

59-9-4

Native of

Occupation

~~Male~~

White

Married

~~Widow~~~~Divorced~~

Female

~~Colored~~~~Single~~~~Widower~~

Number of children living

~~Husband~~

of

Wife

Father's

Name

Mother's

Name

Cause of

Primary

Death

Immediate

How long sick

Accident, Suicide, Homicide

Reported by

Address

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, 65968



Name in Full

Certificate of Death

Ada S. Lease

Town

County

MARYLAND

Died at

Liberty

Frederick

Date 189

Month

Day

Y.

M.

D.

Native of

Occupation

A 8-17

Age 40-2-17

~~Male~~

White

~~Married~~~~Widow~~~~Divorced~~

Female

~~Colored~~

Single

~~Widower~~~~Number of children~~~~Husband~~ of~~Wife~~Father's  
NameMother's  
Name

Cause of

Primary

Death

Immediate

How long sick

10 Accident, Suicide, Homicide

Reported by

Valley Register

Address

10  
Sep. 27  
Middletown

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, 65968



Name in Full

Certificate of Death

Infant — Lee

Died at <sup>Town</sup> Frederick <sup>County</sup> Frederick MARYLAND

Date 1898 <sup>Month</sup> Aug <sup>Day</sup> 4 Age <sup>Y.</sup> X <sup>M.</sup> X <sup>D.</sup> X <sup>Native of</sup> Frederick <sup>Occupation</sup> X X

Male

~~White~~~~Married~~~~Widow~~~~Divorced~~~~Female~~

Colored

~~Single~~~~Widower~~~~Number of children living~~

Husband of X X X X X X

Father's Name James A. Lee Mother's Name Bertha Lee

Cause of { Primary How long sick X X

Death { Immediate Still born

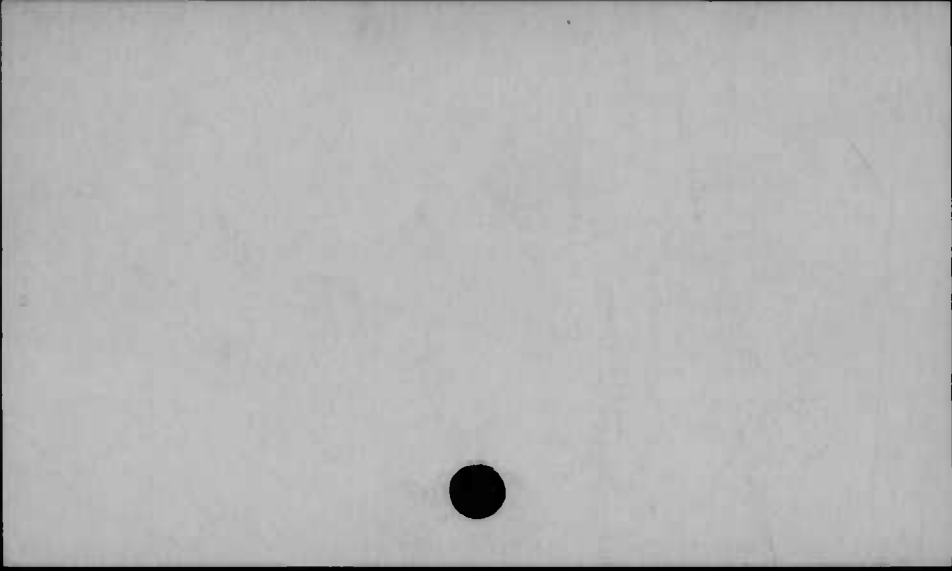
~~Accident, Suicide, Homicide~~

Reported by M. A. Long M.D.

Address 45 S. Market Street Frederick Md.

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, 65968



Name in Full

Town

County

MARYLAND

Died at

Date 1898

Month

Day

Y.

M.

D.

Native of

Occupation

Male

White

Married

WidowDivorced

Female

ColoredSingleWidower

Number of children living

9

Husband

of

Wife

Father's

Name

Mother's

Name

Cause of

Primary

Death

Immediate

How long sick

161

Accident, Suicide, Homicide

Reported by

Daily News (Frederick). Aug. 26

Address

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

Creager, Son of Thurmont, Undertaker



Name in Full

Certificate of Death

Ralph Mehrling

Town

County

Died at

Frederick

Frederick

MARYLAND

Date 1898

Month Day

Aug. 18

Y.

M.

D.

Native of

Occupation

7 25 Maryland

Male

White

Age

~~Single~~~~Widow~~~~Married~~

Single

Widower

Number of children living

Husband

of

Wife

Father's

Name

Lewis Mehrling

Mother's

Name

Estelle Whitmore

Cause of

Primary

Enterocolitis

How long sick

10 days.

Death

Immediate

Asthenia &amp; Convulsions

Accident, Suicide, Homicide

Reported by

Address

S. J. Ha...  
Frederick Md.

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, 65068



Name in Full

Certificate of Death

Charles Nichols

Town

County

MARYLAND

Died at

Washington Junction

Frederick

Date 189

8

Month

Day

Y.

M.

D.

Native of

Occupation

8

19

Age

3

Male

White

~~Married~~~~Widow~~~~Divorced~~~~Female~~~~Colored~~

Single

~~Widower~~~~Number of children living~~

Husband

of

Wife

Father's

Name

Ernest Nichols

Mother's

Name

Cause of

Primary

Burned to death

How long sick

Death

Immediate

Accident, ~~Suicide~~, ~~Homicide~~

Reported by

Frederick Guide August 26

146A

Address

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, 65968



Name in Full

Certificate of Death

Richard Patterson

Town

Frederick

County

Frederick

MARYLAND

Died at

Date 189 8 Month 8 Day 20 Y. 2 M. 6 D. 0 Native of D.C. Occupation \_\_\_\_\_  
 Male \_\_\_\_\_ Married \_\_\_\_\_ Widowed \_\_\_\_\_ Divorced \_\_\_\_\_  
~~Female~~ \_\_\_\_\_ Colored \_\_\_\_\_ Single \_\_\_\_\_ Widower \_\_\_\_\_ Number of children living \_\_\_\_\_

Husband of \_\_\_\_\_  
 Wife \_\_\_\_\_

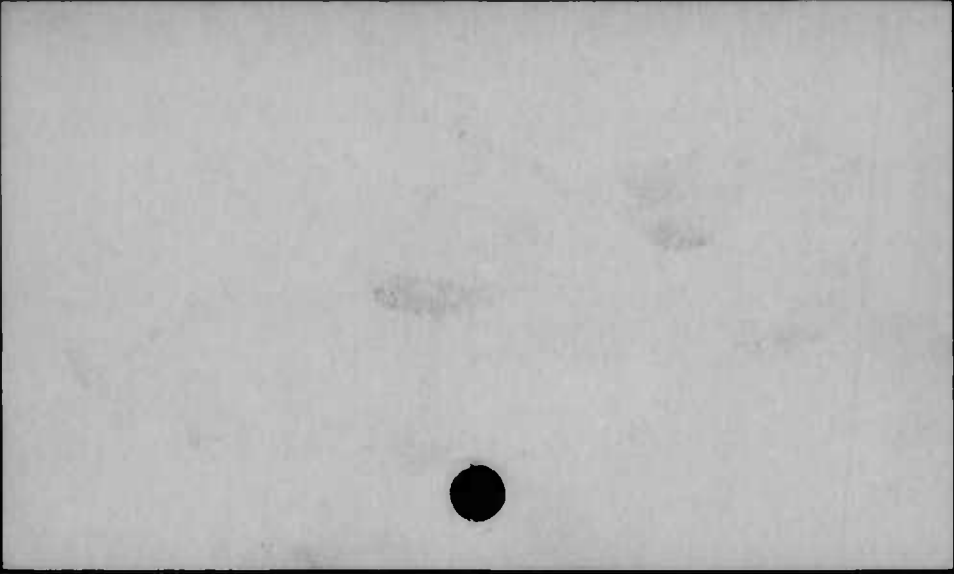
Father's Name \_\_\_\_\_ Mother's Name Ulice Patterson

Cause of Death { Primary Scarletina 6 How long sick 55 new days  
 Immediate Meningitis Accident, Suicide, Homicide \_\_\_\_\_

Reported by Dr. Wm Crawford Johnson  
 Address Frederick Md

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, 65968



*Mrs. Ann Perry*  
 Town County

Died at *Frederick* *Frederick* MARYLAND  
 Month Day Y. M. D. Native of Occupation

Date 189*8* *Aug* *28* Age *81* - *Emmending in d*  
 Male White Married Widow Divorced  
 Female Colored Single Widower Number of children living

Husband of *Henry Perry*  
 Wife  
 Father's Name Mother's Name

Cause of Death { Primary *Paralysis* *44*  
 Immediate  
 How long sick  
 Accident, Suicide, Homicide

Reported by *F. F. Smith*

Address *40 E 20 St -*





Name in Full

Certificate of Death

Latta Pearlump

Town

County

Died at

Fredrick

Fredrick Co

MARYLAND

Date 1898 8 24 Year 130 M. D. Native of Fredrick Co Occupation

Male White Married Widow Divorced

Female Colored Single Widower Number of children living

Husband of

Wife

Father's

Name

Thos. Pickings  
Nat Haven

Mother's

Name

Barbara Pickings  
Nat Haven

Cause of Death { Primary General Dotaly Metamorphosis - 4 years

Immediate Explanation 33

How long sick

Accident, Suicide, Homicide

Reported by

Address

Wm. M. Gomas,

Fredrick Co Md

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU. 65966



*Mrs Annie E Pitts*  
 Town County

Died at *Frederick* *Frederick* MARYLAND

Date 189	Month	Day	Y.	M.	D.	Native of	Occupation
<i>5</i>	<i>Aug</i>	<i>23</i>				<i>Frederick Co</i>	<i>Teacher</i>
<i>Male</i>	<i>White</i>	<i>Married</i>				<i>Widow</i>	<i>Divorced</i>
<i>Female</i>	<i>Colored</i>	<i>Single</i>				<i>Widower</i>	<i>Number of children living</i>

Husband  
of  
Wife

Father's Name *John L Pitts* Mother's Name *Elizabeth S Hall*

Cause of	Primary	How long sick
<i>Death</i>	<i>Immediate</i>	<i>4 1/2 years</i>
	<i>Consumption</i>	<i>Several years</i>
	<i>Profuse Effusion</i>	<i>Accident, Suicide, Homicide</i>

Reported by *Y Y Branch*

Address *40 East 2<sup>nd</sup> St*



Name in Full

Certificate of Death

Town

County

Died at

MARYLAND

Date 189

Month

Day

Age

Y.

M.

D.

Native of

Occupation

8

8

21

3 21

Maryland

~~Male~~

White

~~Married~~~~Widow~~~~Divorced~~

Female

~~Colored~~

Single

~~Widower~~~~Number of children living.~~

Husband

of

Wife

Father's

Name

Mother's

Name

Cause of

Primary

How long sick

Death

Immediate

~~Accident Suicide Homicide~~

Reported by

Address

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, 25069



Common Russo

Town

County

Died at

Frederick

Frederick

MARYLAND

Date 1898

Month

Day

Y.

M.

D.

Native of

Occupation

Aug. 6

Age

8-

Frederick

Male

White

Married

Widow

Divorced

~~Female~~~~Colored~~

Single

Widower

Number of children living

Husband

of

Wife

Father's

Name

Joseph Russo

Mother's

Name

Rosa Russo

Cause of

Primary

Cholera Infantum 10 days

How long sick

Death

Immediate

Brain involvement - Accident, Suicide, Homicide

Reported by

H. H. Smith

Address

40 E. 2<sup>nd</sup> St





A. H. Sigafosse

Died at <sup>Town</sup> Point of Rocks <sup>County</sup> Frederick MARYLAND

Date 189 <sup>Month</sup> 8 <sup>Day</sup> - 22 <sup>Y.</sup> <sup>M.</sup> <sup>D.</sup> Age 48 <sup>Native of</sup> <sup>Occupation</sup>

Male White Married ~~Widow~~ ~~Divorced~~

~~Female~~ ~~Colored~~ ~~Single~~ ~~Widower~~ Number of children living 4

Husband  
of  
Wife

Father's  
Name

Mother's  
Name

Cause of { Primary Cancer of face  
Death { Immediate

How long sick

Accident, Suicide, Homicide

Reported by

Daily Mail. (Hagström)

Address

9-3



Name in Full

Certificate of Death

William E Thomas  
Town Frederick County Frederick MARYLAND

Died at

Date 189

8

Month

8

Day

21

Age

31

Y.

M.

D.

Native of

Mad

Occupation

Labuer

Male

~~White~~

~~Married~~

~~Widow~~

~~Drummed~~

Colored

~~Single~~

~~Widower~~

Number of children living

Husband

of

Wife

Father's

Name

Mother's

Name

Cause of

Primary

Tuberculosis

42<sup>a</sup>

How long sick

Death

Immediate

Accident, Suicide, Homicide

Reported by

Dr. W. Crawford Johnson

Address

Frederick Md

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

over  
LIBRARY BUREAU, 65968

Testament at Laboring  
Bono. Aug 23<sup>d</sup> 98.

A. F. Rice & sons

Name in Full

Certificate of Death

Mary E. Syrya

Town

County

Died at

MARYLAND

Date 1898

Month

Day

Y.

M.

D.

Native of

Occupation

Aug 23 Age 36 10 - Baltimore Housewife

Male

White

Married

Widow

Divorced

Female

Colored

Single

Widower

Number of children living

Five

Husband

of F. L. Syrya

Wife

Father's

Name

Nat Kuehn

Mother's

Name

Nat Kuehn

Cause of

Primary

Malignancy

How long sick

Death

Immediate

Heart Failure

Accident, Suicide, Homicide

Reported by

U. G. M. Kuehn M.D.

Address

Londreuil Md

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, 55955



Name in Full

Certificate of Death

Mary E. Wantry

Town

County

MARYLAND

Died at

Emmittsburg

Frederick

Date 189

5

Month

Day

Feb 30

Age

Y.

M.

D.

Native of

Occupation

~~Male~~

White

~~Married~~~~Widow~~~~Divorced~~

Female

~~Colored~~

Single

~~Widower~~~~Number of children living~~

Husband

of

Wife

Father's

Name

John R. Wantry

Mother's

Name

Cause of

Primary

How long sick

Death

Immediate

Accident, Suicide, Homicide

Reported by

Emmittsburg Chronicle

Address

9-2



Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, 65965





*Ethel Miller*

Died at *Deerfield* Town *Frederick* County *MARYLAND*

Date 189*7* Month *2* Day *11* Y. *2* M. *1* D. *1* Native of \_\_\_\_\_ Occupation \_\_\_\_\_

~~Male~~ White ~~Marr~~ ~~Widow~~ ~~Divorced~~  
 Female ~~Colored~~ Single ~~Widower~~ ~~Number of children living~~

Husband  
of  
Wife

Father's Name *Harry Miller* Mother's Name *Maggie Miller*

Cause of Death { Primary Immediate } How long sick *161*

Accident, Suicide, Homicide

Reported by

Address

*Valley Register (Middletown)*  
*Aug. 27*

